

DEPARTMENT OF MANAGEMENT AND BUDGET  
Facilities Administration  
First Floor, Stevens T. Mason Building  
P.O. Box 30026  
Lansing, Michigan 48909

**BULLETIN NO.**

TO:

Date:

SUBJECT:   File Number:  
              Index Number(s):  
              Contract Number:  
              Department/Agency:  
              Project Name and Location:

INTENT:     This is not a change order. This is a request to the contractor for price breakdown of proposed changes in the work.

PROPOSED CHANGES IN THE WORK:

REASONS FOR CHANGES:

CHANGES IN THE CONTRACT AMOUNT:   Item 1 \$ \_\_\_\_\_ ☐ ADD   ☐ DEDUCT   ☐ NONE  
Attach an itemized breakdown for each item of work.

It is requested that the spaces provided for your quotation and signature be filled in and one copy returned to the above address for review. The authorization of the above work will not become effective to the contractor until confirmed by contract change Order, whereupon the proposed change will then be included in your contract. Please return this Bulletin within ten (10) working days from the date shown herein.

FOR THE CONTRACTOR

FOR THE STATE:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Thomas D. Kane, RA, NCARB, Director  
Design and Construction Division  
Facilities Administration

\_\_\_\_\_  
Title

Reply to:

This form authorizes the preparation of a contract change order request. (Authority: 1984 PA 431)